



Artificial Intelligence In Neuro Degenerative Diseases

¹Name of 1st Author: Dr.P.Narayana Raju

²Name of 2nd Author: P. Sravanthi

³Name of 3rd Author: M. Ajay Ratnam

⁴Name of 4th Author: P v m Sai Teja

⁵Name of 5th Author: kedari Lavanya

¹Designation of 1st Author: Professor

²Designation of 2nd Author: Assistant Professor

³Designation of 3rd Author: Assistant Professor

⁴Designation of 4th Author: Student pursuing B Pharm 4th year

⁵Designation of 5th Author: Student pursuing B Pharm 4th year

^{1,2,3,4,5} Name of Department of Authors: Department Of Pharmaceutics

^{1,2,3,4,5} Name of organization of Authors, City, Country: Sri Vasavi Institute Of Pharmaceutical Sciences,
Tadepalligudem ,
Andhra Pradesh

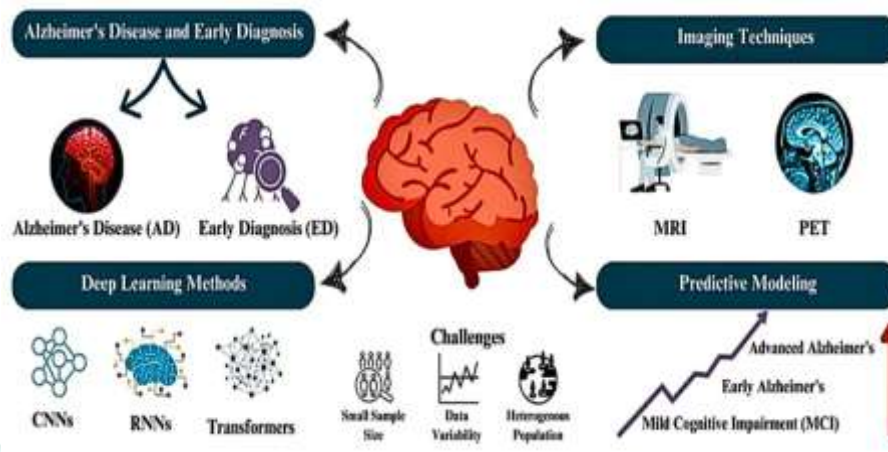
Abstract: Neurodegenerative diseases such as Alzheimer's, Parkinson's, and amyotrophic lateral sclerosis present major global health challenges due to their progressive nature and lack of curative treatments. Recent advances in artificial intelligence (AI) have transformed research and clinical approaches in this field. By integrating machine learning, deep learning, and multimodal data analytics, AI systems can detect early pathological changes, analyze neuroimaging and biomarker patterns, and improve diagnostic precision. AI-enabled monitoring through wearable devices, speech analysis, and digital behavioral tracking provides continuous assessment of disease progression, supporting timely interventions and individualized care. In drug discovery, AI accelerates target identification, compound screening, and drug repurposing, significantly reducing development timelines. Collectively, AI is reshaping the landscape of neurology by enabling earlier detection, more accurate diagnosis, personalized treatment strategies, and more efficient therapeutic development.

Index Terms -Artificial intelligence, Neurodegenerative diseases, Early diagnosis, Digital biomarkers, Drug discovery

I. INTRODUCTION

Neurodegenerative diseases are becoming a more significant public health concern over time. They comprise a range of progressive, chronic illnesses characterized by the gradual degeneration of nerve cells, or neurons, leading to issues with function, movement, and thought processes. Huntington's disease [HD], Parkinson's disease [PD], and Alzheimer's disease [AD] are the three most prevalent of these illnesses, and they all have a big impact on individuals, families, and healthcare systems globally. Because many diseases are incurable and irreversible, early discovery is crucial for managing symptoms, slowing the disease's progression, and improving patient outcomes [1]. Bioinformaticians, computer scientists, and medical researchers frequently work in separate frameworks, which results in disjointed approaches. In turn, broad system-level studies are essential to characterize how international partnerships are organized, how the structure of knowledge is reconfigured, and how new technological directions take

shape in this interdisciplinary field. However, there is still a glaring lack of systematic examination of these dimensions in the scholarship that is currently available. By identifying co-authorship networks between nations/regions, institutions, and authors, analysing journal influence, and detecting keyword co-occurrence, bibliometric analysis is a potent tool for mapping research landscapes. It creates scientific mapping that outlines the dynamics and structure of domain development by combining visualization techniques with multidimensional data, such as authorship, citations, and keyword co-occurrence. This approach helps identify emerging research frontiers and inform resource allocation strategies, while fostering interdisciplinary synergies and translational medical advancements [2].



II. ROLE OF AI IN NEURODEGENERATIVE DISEASES

With its potent methods for comprehending, diagnosing, and treating illnesses like Alzheimer's, Parkinson's, and ALS, artificial intelligence (AI) is revolutionizing the fight against neurodegenerative diseases. AI can process large, complicated datasets, such as genetic profiles, brain scans, and electronic health records, by utilizing machine-learning and deep-learning models. This allows AI to find early warning indicators and subtle biomarkers that human experts frequently overlook [3]. These tools aid in the prediction of an individual's disease progression in clinical care, allowing for more individualized treatment planning [4]. Through multi-modal data integration, AI also aids research by accelerating the identification of novel biomarkers and therapeutic targets [5]. Furthermore, AI in conjunction with "digital biomarkers"—such as speech patterns, behavioral data, or eye-tracking metrics recorded by wearable or remote devices—is making earlier detection possible than in the past [6].

III. AI IN EARLY DIAGNOSIS AND TREATMENT

Artificial intelligence is emerging as a key technology for improving the early detection and treatment of neurodegenerative disorders. By examining detailed patterns in brain scans, genetic information, speech, and everyday behaviors, AI systems can identify early signs of diseases like Alzheimer's, Parkinson's, and ALS with greater precision than many traditional diagnostic tools. Recognizing these changes early enables healthcare providers to offer more timely and individualized interventions, including tailored therapies and lifestyle adjustments that may help slow the progression of the disease. AI also plays an important role during treatment, assisting clinicians in predicting medication responses, refining dosage plans, and tracking a patient's ongoing health status. Overall, these advancements are fostering a more proactive, accurate, and patient-focused approach to managing neurodegenerative conditions [7].

IV. APPLICATIONS OF AI IN DIAGNOSIS AND TREATMENT

Applications of Artificial Intelligence in the Diagnosis of Neurodegenerative Disorders:

Artificial intelligence (AI) has become a central component in advancing diagnostic frameworks for neurodegenerative diseases. By leveraging machine learning (ML) and deep learning (DL) techniques, AI systems enable earlier identification, enhanced characterization, and more consistent assessment of conditions such as Alzheimer's disease (AD), Parkinson's disease (PD), amyotrophic lateral sclerosis (ALS), and front temporal dementia (FTD) [8].

1. Imaging-Driven Diagnostic Enhancements

AI has markedly improved the interpretation of neuroimaging data, including MRI, CT, PET, and SPECT. Deep learning architectures, particularly convolutional neural networks (CNNs), can automatically extract relevant anatomical and functional patterns, allowing precise segmentation, volumetric quantification, and detection of early structural or metabolic abnormalities [9]. These tools also facilitate differentiation between clinically overlapping syndromes, while radiomics-based pipelines expand diagnostic capabilities by identifying subtle, high-dimensional image features [10].

2. Analysis of Biomarkers and Multi-Omics Data

The application of AI to biological datasets—including proteomic, metabolomics, and genomic profiles—has enabled more accurate identification of biomarker signatures associated with disease processes. Machine learning classifiers such as random forests, support vector machines, and gradient-boosting models are commonly used to evaluate cerebrospinal fluid (CSF) biomarkers (e.g., amyloid- β , phosphorylated tau, neuro filament light) [11]. In genetic research, AI contributes to the discovery of pathogenic variants, enhances polygenic risk estimation, and supports molecular subtyping that can inform individualized diagnostic strategies [12].

3. Computational Assessment of Cognition, Speech, and Behaviour

AI-enabled analysis of speech and cognitive performance offers new opportunities for early detection. Natural language processing (NLP) algorithms can quantify abnormalities in linguistic complexity, semantic content, prosody, and articulation, which are indicative of early AD, PD, and ALS [13]. Additionally, digital or smartphone-based cognitive assessments provide continuous, quantitative behavioural metrics, improving sensitivity to mild impairments that may not be detected through conventional clinical testing [14].

4. Wearable Technologies and Sensor-Based Assessment

The integration of wearable devices and home-based sensors generates detailed, longitudinal datasets describing motor function, gait characteristics, tremor patterns, sleep disturbances, and daily activities. Machine learning models applied to these signals can identify prodromal indicators of PD, track motor decline in ALS, and monitor disease progression remotely [15]. This approach complements traditional clinical evaluations by providing objective, real-world measures of neurological function [16].

5. Predictive Modelling and Early Risk Assessment

AI-based predictive frameworks are increasingly used to identify individuals at elevated risk for neurodegenerative disorders. By synthesizing clinical information, imaging biomarkers, genetic data, and lifestyle factors, these models can estimate the likelihood of conversion from mild cognitive impairment to AD or predict PD onset before motor symptoms appear [17]. Longitudinal modelling also facilitates accurate forecasting of cognitive or motor deterioration, improving patient stratification and supporting clinical trial optimization [18].

6. Integration of Multimodal Data

A major advantage of AI lies in its ability to integrate diverse data modalities. Multimodal deep learning approaches combine imaging, molecular biomarkers, cognitive test scores, electronic medical records, and sensor-derived signals to construct a comprehensive representation of disease pathology [19]. Such integrative models generally outperform single-modality analyses and contribute significantly to the evolution of precision neurology [20].

7. Clinical Decision Support and AI in Digital Pathology

AI-driven decision support systems assist clinicians in interpreting complex datasets by highlighting abnormalities, generating differential diagnoses, and organizing relevant patient information from electronic health records [21]. In neuropathology, deep learning tools applied to digitized histological images provide automated quantification of pathological hallmarks—such as amyloid plaques, tau tangles, and α -synuclein aggregates—and improve consistency in diagnostic evaluation [22].

V. PATIENT MONITORING AND MANAGEMENT

AI-based monitoring in neurodegenerative diseases is rapidly changing how clinicians observe patients over time. Wearable devices such as wristbands, patches, or smartwatches, along with mobile apps and in-home sensors, continuously collect data on movement, speech, sleep, and daily routines. These systems often use inertial sensors, accelerometers, and microphones to pick up on very subtle changes—alterations in gait rhythm, tremor intensity, or hesitation in speech—that might be missed during brief clinical visits. For instance, continuous monitoring can reveal patterns of bradykinesia or freezing of gait in Parkinson's disease, giving a more nuanced and dynamic view of the patient's condition [14]. When managing these diseases, AI enables the analysis of long-term data trends and helps predict worsening symptoms before they become clear. Predictive algorithms, which are often based on machine learning or probabilistic modelling, can alert clinicians about upcoming declines or changes in symptoms. This allows for timely adjustments in therapy. Changes might include altering medication doses, scheduling follow-up visits, or customizing non-drug treatments. Additionally, AI tools assist with patient adherence. Smart pillboxes keep track of medication intake, and mobile reminders help patients follow their schedules. These systems reduce unnecessary hospital visits by allowing effective remote monitoring. This is especially beneficial for patients who have limited mobility or struggle to attend frequent in-clinic assessments [15].

In addition to monitoring and rehabilitation, AI supports personalized care by generating custom management plans. Based on behavioural and physiological data such as quality of speech, gait measures, and sleeping patterns, AI can help develop individualized cognitive loading interventions, behavioural changes, and therapeutic programs. Digital cognitive tests using AI can identify the first signs of progressive decline in memory or executive function, allowing for early intervention in Alzheimer's disease. Besides, placing the resulting guidance generated by AI into electronic health records creates a rich, holistic view of each patient's journey in care, improving collaboration among neurologists, primary care providers, and caregivers. In this manner, AI does not simply offer more information; it also creates more precise, tailored and preemptive care, which creates better patient outcomes and quality of life [16].

VI. DRUG DISCOVERY AND DEVELOPMENT

Once there is a target, AI is also useful with in silico drug design. Deep-learning algorithms are capable of screening millions of chemical compounds and predict the extent to which each would bind to a protein involved in the disease, minimizing the highly labour intensive lab work associated with screening compounds. In addition, more sophisticated generative AI models can design completely new molecules that are optimized for feasibility, safety and efficacy, and more importantly, can cross the blood-brain barrier, which is critical for drugs for neurodegenerative disease. AI can significantly decrease the time and expense for identifying good drug candidates [17].

Additionally, preclinical and clinical research phases are seeing an increase in the use of AI. AI-powered image processing can more accurately measure protein aggregates, neuronal loss, and other disease markers in lab models than manual evaluation. Machine-learning tools analyse biomarkers, brain-imaging data, and even physiological data from wearable devices to help determine which patients in clinical trials are most likely to respond to a new therapy. The historically high failure rate in neurodegenerative drug development is addressed by more focused and effective trials [18].

Yet another key contribution of AI is drug repurposing; the investigation of new uses for a drug that already exists. By applying literature mining, biological network analysis, and predictive modelling, AI can identify drugs already approved that could exert neuroprotective effects. Since these drugs already have existing safety profiles, their repurposing can help hasten treatment availability for patients much faster. The aforementioned developments are moving the field closer to personalized medicine where therapies will be tailored according to an individual's unique genetic and clinical profile [19].

VII. CONCLUSION

Artificial intelligence is rapidly becoming a foundational tool in the understanding, diagnosis, and management of neurodegenerative disorders. Through its capacity to process complex datasets—spanning neuroimaging, genomics, clinical records, and real-world behavioural signals—AI supports more sensitive and earlier detection than conventional methods. Its applications in patient monitoring allow for dynamic, individualized management plans that can adjust to subtle changes in symptoms over time. Furthermore, AI significantly enhances drug discovery and repurposing efforts by streamlining the identification of therapeutic targets and optimizing clinical trial design. While continued collaboration across clinical, computational, and biomedical disciplines is essential, AI already represents a transformative force that is advancing precision neurology and improving patient outcomes on multiple fronts.

ACKNOWLEDGMENT

I would like to express my sincere gratitude to my guide and mentors for their continuous support, encouragement, and valuable guidance throughout the completion of this work. I am also thankful to my faculty members, friends, and colleagues for their constructive suggestions and cooperation. Finally, I extend my heartfelt appreciation to my family for their constant motivation and understanding, which helped me accomplish this task successfully.

REFERENCES

- 1..Fanijo S, Hanson U, Akindahunsi T, Abijo I, Dawotola TB. Artificial intelligence-powered analysis of medical images for early detection of neurodegenerative diseases. *World Journal of Advanced Research and Reviews*. 2023 Aug;19(2):1578-87.
- 2.Zhang Y, Yu L, Lv Y, Yang T, Guo Q. Artificial intelligence in neurodegenerative diseases research: a bibliometric analysis since 2000. *Frontiers in Neurology*. 2025 Jul 16;16:1607924.
3. Tăuțan AM, Ionescu B, Santarnecchi E. Artificial intelligence in neurodegenerative diseases: A review of available tools with a focus on machine learning techniques. *Artificial intelligence in medicine*. 2021 Jul 1;117:102081.
4. Hassan YM, Wanas A, Ali AA, El-Sayed WM. Integrating artificial intelligence with nanodiagnostics for early detection and precision management of neurodegenerative diseases. *Journal of Nanobiotechnology*. 2025 Oct 13;23(1):668.
5. Liu H, Zhang X, Liu Q. A review of AI-based radiogenomics in neurodegenerative disease. *Frontiers in big Data*. 2025 Feb 20;8:1515341.
6. Chudzik A, Śledzianowski A, Przybyszewski AW. Machine learning and digital biomarkers can detect early stages of neurodegenerative diseases. *Sensors*. 2024 Feb 29;24(5):1572.
7. Yang N, Liu J, Sun D, Ding J, Sun L, Qi X, Yan W. Motor symptoms of Parkinson's disease: critical markers for early AI-assisted diagnosis. *Frontiers in Aging Neuroscience*. 2025 Jul 18;17:1602426.
8. Feng T. Applications of artificial intelligence to diagnosis of neurodegenerative diseases. *Advances in Biomedical and Bioinformatics Engineering*. 2023:648-55.
9. Borchert RJ, Azevedo T, Badhwar A, Bernal J, Betts M, Bruffaerts R, Burkhart MC, Dewachter I, Gellersen HM, Low A, Lourida I. Artificial intelligence for diagnostic and prognostic neuroimaging in dementia: A systematic review. *Alzheimer's & Dementia*. 2023 Dec;19(12):5885-904.
10. Hassan YM, Wanas A, Ali AA, El-Sayed WM. Integrating artificial intelligence with nanodiagnostics for early detection and precision management of neurodegenerative diseases. *Journal of Nanobiotechnology*. 2025 Oct 13;23(1):668.
11. Dabbaghi KG, Khosravirad Z, Jamalnia S, GhorbaniNia R, Mahmoudikohani F, Zakeri H, Khastehband S. The use of artificial intelligence in the management of neurodegenerative disorders; focus on Alzheimer's disease. *Galen Medical Journal*. 2023 Sep 3;12:e3061.
12. Reddy S, Giri D, Patel R. Artificial Intelligence Diagnosis of Parkinson's Disease From MRI Scans. *Cureus*. 2024 Apr 23;16(4).
13. Zhao H, Cao J, Xie J, Liao WH, Lei Y, Cao H, Qu Q, Bowen C. Wearable sensors and features for diagnosis of neurodegenerative diseases: A systematic review. *Digital Health*. 2023 May;9:20552076231173569.
14. Bounsall K, Milne-Ives M, Hall A, Carroll C, Meinert E. Artificial intelligence applications for assessment, monitoring, and management of Parkinson disease symptoms: protocol for a systematic review. *JMIR Research Protocols*. 2023 Jun 14;12(1):e46581.
15. De la Fuente Garcia S, Ritchie CW, Luz S. Artificial intelligence, speech, and language processing approaches to monitoring Alzheimer's disease: a systematic review. *Journal of Alzheimer's Disease*. 2020 Dec 8;78(4):1547-74.
16. Parsapoor M. AI-based assessments of speech and language impairments in dementia. *Alzheimer's & Dementia*. 2023 Oct;19(10):4675-87.
17. Zhavoronkov A, Ivanenkov YA, Aliper A, Veselov MS, Aladinskiy VA, Aladinskaya AV, Terentiev VA, Polykovskiy DA, Kuznetsov MD, Asadulaev A, Volkov Y. Deep learning enables rapid identification of potent DDR1 kinase inhibitors. *Nature biotechnology*. 2019 Sep;37(9):1038-40.
18. Esteva A, Chou K, Yeung S, Naik N, Madani A, Mottaghi A, Liu Y, Topol E, Dean J, Socher R. Deep learning-enabled medical computer vision. *NPJ digital medicine*. 2021 Jan 8;4(1):5.

19. Ekins S, Puhl AC, Zorn KM, Lane TR, Russo DP, Klein JJ, Hickey AJ, Clark AM. Exploiting machine learning for end-to-end drug discovery and development. Nature materials. 2019 May;18(5):435-41.

